

FORM NO. 5

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

WRIT N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

N. B. McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Abbeville S.C.
 Township of Abbeville S.C.
 or Town of
 or City of Abbeville (No. Washington)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only
5577

Registration District No. 1-A Registered No. 20
 (For use of Local Registrar)
 St.; 2nd Ward

(2) Full Name of Child Maurice Reid McPherson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? X (5) Number in order of birth 3 (6) Are Parents Married? yes (7) DATE OF BIRTH March 10, 1915
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Taylor McPherson

(9) PRESENT POSTOFFICE OF FATHER Abbeville S.C.

(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 63 (Years)

(12) BIRTHPLACE Richland Co.

(13) OCCUPATION Locomotive Eng

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Miss Stela Itonea

(15) PRESENT POSTOFFICE OF MOTHER Abbeville S.C.

(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 28 (Years)

(18) BIRTHPLACE Dooce Ga

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. C. Stiles M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Abbeville S.C.

Given name added from a supplemental report

..... 191.....
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Mar 10 1915 (28) T. G. Perrin Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

Registrar

Local Registrar

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